

rDec. 20. 2005 2:52PM cProt. Equinox 514-733-4424

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(1 page) 1-571-273-8300

|                        |                              |
|------------------------|------------------------------|
| Application Number     | 10/829,265                   |
| Filing Date            | 4/22/2004                    |
| First Named Inventor   | Patrice COHEN                |
| Group Art Unit         |                              |
| Examiner Name          | ELKINS GARY E 1-571-272-4537 |
| Attorney Docket Number | 753-B01.US                   |

☒ I hereby revoke all previous powers of attorney given in the above-identified application.

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I am the:

☒ Applicant

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Name Patrice COHEN

Signature 

Title and Company

Date 12/12/05

Note: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

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